## TRANSMITTAL OF UTILITY PATENT APPLICATION FOR FILING Certification under 37 CFR 1.10 (if applicable)

|            | EL 385 572 778 US   | August 29, 2003   |
|------------|---|---|
| "Exp       | press Mail" mailing label number  | Date of Deposit   |
| in ar      | reby certify that this transmittal letter, enclosed application, and any on envelope with the United States Postal Service "Express Mail Post Office and addressed to Mail Stop Patent Application, Commissioner for F                        | ice to Addressee" service under 37 CFR 1.10 on the date indicated   |
| (Тур       | Cederic Rodgers  ped or printed name of person mailing application)   | (Signature of person mailing application)   |
| Con<br>P.O | ol Stop Patent Application nmissioner for Patents b. Box 1450 xandria, VA 22313-1450  | Attorney Docket No. <u>ID-01</u> Customer Number <u>002387</u>  |
| Sir:       |   |   |
| Trai       | nsmitted herewith for filing is the utility patent application of i   | nventor(s): Evan T. Ward and Donald J. Nole   |
| and        | entitled: CONTAINER CAP WITH FINGER-OPEN  | ABLE, RECLOSABLE CLOSURE  |
| 1.         | Type Of Application   |   |
|            | This application is:  |   |
|            | <ul> <li>X an original (nonprovisional) application.</li> <li>a divisional of prior application Serial No.</li> <li>a continuation of prior application Serial No.</li> <li>a continuation-in-part of prior application Serial No.</li> </ul> | ·   |
|            | <ul> <li>The entire disclosure of the prior application is considered application and is hereby incorporated by reference therefore.</li> <li>The prior application is assigned of record to:</li> </ul>                                      | ein.  |
|            | Additional prior application information: Examiner  |   |
| 2.         | Enclosed Application Elements are:  |   |
|            | X A duplicate copy of this transmittal letter, X specification (including claims and abstract) containing proceedings:  | drawings, <b>OR</b> mal drawings (Figs. 1-11); ication including a power of attorney, <b>OR</b> oplication including a power of attorney, <b>OR</b> er of attorney from a priority application, |
|            | c statement verifying above copies  |   |

| 3. Enclosed Accompanying Application Parts | are |
|--|-----|
|--|-----|

| Preliminary | Amendment |
|-------------|-----------|
|-------------|-----------|

- \_\_ Claim cancellations are indicated in Preliminary Amendment
- X one itemized, stamped, and self-addressed postcard for the PTO Mail Room date stamp.
- \_\_ English translation document
- Information Disclosure Statement including Form PTO-1449 and copies of the citations therein.

  X Applicant claims small entity status. See 37 CFR 1.27.

## 4. Filing Fees (as calculated below)

|  | (Col. 1)                    | (Col. 2)               |                       |           |
|--|-----------------------------|------------------------|-----------------------|-----------|
| For:   | Number Filed                | Number Extra           | Rate                  | Fee       |
| Basic Fee  |                             |                        |                       | \$ 750.00 |
| Total Claims   | 20 — 20                     | = 0                    | x \$ 18 =             | \$        |
| Independent Claims   | 2-3                         | = 0                    | x \$84=               | \$        |
| Multiple Dependent Claim Presented (if applicable) + \$280 = |                             |                        |                       |           |
|  |                             |                        | Subtotal              | \$ 750.00 |
|  | R                           | Reduction by 50% for f | iling by small entity | \$ 375.00 |
| * If the difference in Co                                    | 1. 1 is less than zero, ent | er "0" in Col. 2.      | TOTAL                 | \$ 375.00 |

| -     |  | Please charge my Deposit Account No in the amount of \$   |  |  |
|-------|--|---|--|--|
| _     | _  | A check in the amount of \$ to cover the filing fee is enclosed.  |  |  |
| _     | <u>X</u>   | A check in the amount of \$375.00 to cover the filing fee will be submitted in Response to the Notice of Missing  |  |  |
|       |  | Parts.  |  |  |
| _     |  | The Commissioner is authorized to charge payment of the following amounts associated with this communication      |  |  |
|       |  | or credit any overpayment to Deposit Account No:  |  |  |
|       |  | Additional filing fees under 37 CFR 1.16 or deficiencies in remittances therefor.                                 |  |  |
|       |  | Additional processing fees under 37 CFR 1.17 or deficiencies in remittances therefor.                             |  |  |
| _     | ONLY if applicant has partially paid the patent issue fee under 37 CFR §1.18, then the deficiency st |   |  |  |
|       |  | charged to Deposit Account No, and the Commissioner is authorized to so charge the Deposit Account.               |  |  |
| _     | _  | The Commissioner is hereby generally authorized under 37 CFR 1.136(a)(3) to treat any future reply in this or any |  |  |
|       |  | related application filed pursuant to 37 CFR 1.53 requiring an extension of time as incorporating a request       |  |  |
|       |  | therefor, and the Commissioner is hereby specifically authorized to charge Deposit Account No for any             |  |  |
|       |  | fee that may be due in connection with such a request for an extension of time.                                   |  |  |
|       |  | August 29, 2003  Attorney's Signature  Michael A. Hierl, Reg. No. 29,807  |  |  |
| Date: |  | August 29, 2003 Attorney's Signature  |  |  |
|       |  | Michael A. Hierl, Reg. No. 29,807   |  |  |

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